'A' virus infection is benign as compared to Hepatitis B, C and E virus infection. The research studies conducted in India have shown that over 90% of children develop natural immunity to Hepatitis 'A' virus infection without taking a vaccine. This immunity develops early, continues life long and is stronger than vaccine induced immunity. Use of Hepatitis 'A' vaccine is useful in countries where the presence of protective antibody in blood has been found to be low. It is therefore, better that a child is tested for protective antibody against Hepatitis 'A' before given Hepatitis 'A' vaccine. At present Hepatitis 'A' vaccination is not included in the routine immunization programme of Government of India.

Pradhan Mantri Swasthya Suraksha Yojana

1564. SHRI ABANI ROY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have launched the Pradhan Mantri Swasthya Suraksha Yojana recently;

(b) if so, the salient features thereof;

(c) whether the entire population in various States and UTs would be covered under the scheme; and

(d) if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI SUSHMA SWARAJ): (a) to (d) Yes, Sir. Considering the need for providing specialized treatment to needy and poor people in the under-served areas, Government of India has launched a Scheme by the name "Pradhan Mantri Swasthya Suraksha Yojana'. The Scheme envisages the following:—

(i) Setting up institutions on the pattern of AIIMS in certain under-served States. This Scheme has been inaugurated by the Hon'ble Prime Minister by laying the foundation stone for one of such Institutions at Bhubaneswar on 15.7.2003.

(ii) Upgrading exsisting institutions in certain remaining under-served States/regions to meet the demand for super speciality health services.

(iii) Introduction of Janani Swasthya Yojana by augmenting and clubbing the existing schemes, to reduce infant mortality rate and maternal mortality rate.

(iv) Setting up of container based mobile hospital for providing emergency medical relief under Sanjivani Scheme.

(v) "Universal Health Insurance Scheme" to provide health cover to the poor. This has already been launched by the Prime Minister on 14th July, 2003.

Role of NICD to control mysterious disease

1565. SHRI ABANI ROY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware that mysterious disease is prevalent in some States and the National Institute of Communicable Diseases has played an ineffective role to check/diagnose such diseases;

(b) if so, whether such mysterious disease has claimed many lives in West Bengal and Andhra Pradesh recently;

(c) if so, the details thereof; and

(d) the details of the assistance other than financial rendered by Government to the affected States during the past 3-4 months?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI SUSHMA SWARAJ): (a) Outbreaks of viral fever and encephalitis have been reported from some districts of Andhra Pradesh, Kerala, Maharashtra and West Bengal.

Teams from the National Institute of Communicable Diseases (NICD), New Delhi and from the National Institute of Virology (NIV), Pune visited the outbreak affected areas. They assisted the State Health Authorities in investigation and provided laboratory support. Laboratory reports from NICD and NIV indicate that the outbreaks in Andhra Pradesh and Maharashtra are due to viral encephalitis, in